

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Brett



In re Patent Application of:

Shunpei YAMAZAKI et al.

Serial No.: 09/619,478

Filed: July 19, 2000

For: DISPLAY DEVICE AND METHOD
FOR OPERATING THE SAME

-) Group Art Unit: 2675
-) Examiner: Uchendu O. ANYASO
-) Confirmation No.: 1882
-) Date: December 23, 2003

CERTIFICATE OF MAILING OR TRANSMISSION
[37 CFR 1.8(a)]

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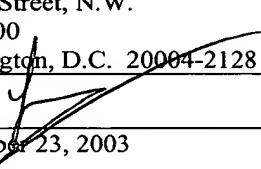
In response to the Office Action mailed September 24, 2003, please consider Applicants' remarks in relation with the above-identified application.



AF
2700

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/619,478
		Filing Date	July 19, 2000
		First Named Inventor	Shunpei YAMAZAKI et al.
		Group Art Unit	2675
		Examiner Name	Uchendu O. Anyaso
Total Number of Pages in This Submission		Attorney Docket Number	
		740756-2187	

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Request for Reconsideration <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
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Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	<u>Luan C. Do, Reg. No. 38,434</u> Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	December 23, 2003

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